

## Bluffton University Church Matching Scholarship Program

## 2024-2025 Academic Year Participation Form

Bluffton University will match dollar for dollar the first \$1,000 provided by any Christian church congregation. Beyond that amount, Bluffton will match \$1 for every \$4 from the congregation, up to full tuition. The congregation must provide a minimum award of \$100 before the university will contribute matching funds. The university will match contributions regardless of financial need. Federal regulations prescribe rules for packaging aid. When church matching funds are submitted after initial aid has been sent to the student, the financial aid office may be required to revise a student's financial aid offer.

submi	tted after initial aid has been sent to the student a student's financial aid offer.	5 5	•
NOTE: T	his paper form can be completed and submitted	via regular mail or email.	
	Name of congregation	City	State
	known its intent to participate in Bluffton Ur m. In signing below, the congregation ackn	,	larship
1.	that the scholarship program has been for	mally approved by the church;	
2.	that the program meets Internal Revenue contributions. According to the IRS, gifts are "made to a qualified organization an person." Parents who contribute to this their gift to their child's scholarship will contribution.	qualify for a charitable contrib d not set aside for use by a program through the church	ution if they specific and direct
3.	that the church will submit annually to Bluff and the amount of funds awarded to each	• •	y the church
Name of	pastor		
Address	of Church		
City, Sta	te, Zip		

FAX

Church e-mail address

Church phone number

Today's date

## Academic year 2024-2025

Name of congregation	-
Signature of person completing the form	Print name
Phone:	email:
Phone number of person completing form	and e-mail address
and return by <b>May 1, 2024</b> *. It is unde awards are finalized, the financial ai applicable, an amended form submitted received after August 1, 2024, the mo	and his/her anticipated award for the academic year erstood that the amount(s) may change. When actual d office should be notified by July 1, 2024, and if d. Please note that if any unanticipated funds are onies will not be matched by the university. We ask I payments, by Aug. 15, 2024, for fall semester, and by
Name(s) of continuing student(s)	Anticipated award
Name(s) of new student(s)	Anticipated award
Please return this form by May 1 to:	Bluffton University Financial Aid Office, Box 48 1 University Drive Bluffton, OH 45817 or finaid@bluffton.edu

\*If more time is needed to complete this process, please contact us at finaid@bluffton.edu with your anticipated date to complete and submit the form.

Questions?

Call: 419.358.3266

E-mail: finaid@bluffton.edu